## PUBLIC UTILITIES COMMISSION

505 VAN NESS AVENUE SAN FRANCISCO, CA 94102-3298



## Regulatory/Official Contact Information Update Request

The Telecommunications Division (TD) maintains contact information for all telecommunications carriers certificated by the California Public Utilities Commission (Commission) to provide telecommunications services in California. **The Commission will use this information for its official mailings and contacts, primarily through e-mail.** Please return the complete form by Fax at 415-703-4405 or by e-mail to Telco\_Answer@cpuc.ca.gov. Please check your contact information at:

http://telweb1.cpuc.ca.gov/carriersearch/app/carrier\_external\_search/list.asp

| Legal Name:  |   |  |   |
|--|---|--|---|
| DBA:   |   |  |   |
| Utility Identification Number: U-  |   |  |   |
| Change of Contact Information  |   |  |   |
| <ol> <li>Name/Department:</li> <li>E-Mail Address:</li> </ol>  | Title:  |  |   |
| <ol> <li>Address:</li> <li>Telephone:</li> <li>Customer Service Telephone Number:</li> <li>Web-Site Address:</li> </ol>  | City:<br>Fax:   | State:   | Zip Code:                                       |
| * Change of Name   |   |  |   |
| To change your legal name and/or fictitious name, you mand Advice Letter Filing Summary form is available at: http://www.cpuc.ca.gov/static/industry/telco/information+  * Consolidation of Utility Identification Numb  If you, a single entity, have been assigned more than one numbers into one. This consolidation would not change y Commission in identifying you as one single entity. You Commission and providing the following information: | -for+providing+service/<br>ers<br>utility identification nur<br>your authorities to do bu | /alsummaryform.htm<br>mber, TD encourages y<br>usiness in California b | you to consolidate these<br>ut would assist the |
| <ul><li>Surviving Legal Name and Utility Identi</li><li>Disappearing Legal Name(s) and Utility</li></ul>   |   | ber(s)   |   |
| * Cancellation of Authority  |   |  |   |
| If you no longer conduct business and have no customers<br>Advice Letter with the Commission and providing the following   |   | initiate a cancellation  | of authority by filing an                       |
| <ul> <li>Legal Name and Utility Identification No</li> <li>Date that operations ceased, and</li> <li>A copy of last Transmittal form and Fee</li> </ul>  |   | Utilities Reimbur  | sement Account                                  |
| I,, hereby certifiest of my knowledge and belief the above information is  |   |  | e above carrier, and to the                     |
| Signature:   | Date:   |  |   |

Email Address:

Phone:

Rev 2/05

Title: